

118TH CONGRESS
1ST SESSION

H. R. 3226

AN ACT

To reauthorize the Prematurity Research Expansion and
Education for Mothers who deliver Infants Early Act.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

1 **SECTION 1. SHORT TITLE.**

2 This Act may be cited as the “PREEMIE Reauthor-
3 ization Act of 2023”.

4 **SEC. 2. RESEARCH RELATING TO PRETERM LABOR AND DE-**
5 **LIVERY AND THE CARE, TREATMENT, AND**
6 **OUTCOMES OF PRETERM AND LOW BIRTH-**
7 **WEIGHT INFANTS.**

8 (a) IN GENERAL.—Section 3(e) of the Prematurity
9 Research Expansion and Education for Mothers who de-
10 liver Infants Early Act (42 U.S.C. 247b–4f(e)) is amended
11 by striking “fiscal years 2019 through 2023” and insert-
12 ing “fiscal years 2024 through 2028”.

13 (b) TECHNICAL CORRECTION.—Effective as if in-
14 cluded in the enactment of the PREEMIE Reauthoriza-
15 tion Act of 2018 (Public Law 115–328), section 2 of such
16 Act is amended, in the matter preceding paragraph (1),
17 by striking “Section 2” and inserting “Section 3”.

18 **SEC. 3. INTERAGENCY WORKING GROUP.**

19 Section 5(a) of the PREEMIE Reauthorization Act
20 of 2018 (Public Law 115–328) is amended by striking
21 “The Secretary of Health and Human Services, in collabo-
22 ration with other departments, as appropriate, may estab-
23 lish” and inserting “Not later than 18 months after the
24 date of the enactment of the PREEMIE Reauthorization
25 Act of 2023, the Secretary of Health and Human Services,

1 in collaboration with other departments, as appropriate,
2 shall establish”.

3 **SEC. 4. STUDY ON PRETERM BIRTHS.**

4 (a) IN GENERAL.—The Secretary of Health and
5 Human Services shall enter into appropriate arrange-
6 ments with the National Academies of Sciences, Engineer-
7 ing, and Medicine under which the National Academies
8 shall—

9 (1) not later than 30 days after the date of en-
10 actment of this Act, convene a committee of experts
11 in maternal health to study premature births in the
12 United States; and

13 (2) upon completion of the study under para-
14 graph (1)—

15 (A) approve by consensus a report on the
16 results of such study;

17 (B) include in such report—

18 (i) an assessment of each of the topics
19 listed in subsection (b);

20 (ii) the analysis required by sub-
21 section (c); and

22 (iii) the raw data used to develop such
23 report; and

1 (C) not later than 24 months after the
2 date of enactment of this Act, transmit such re-
3 port to—

4 (i) the Secretary of Health and
5 Human Services;

6 (ii) the Committee on Energy and
7 Commerce of the House of Representa-
8 tives; and

9 (iii) the Committee on Finance and
10 the Committee on Health, Education,
11 Labor, and Pensions of the Senate.

12 (b) ASSESSMENT TOPICS.—The topics listed in this
13 subsection are of each of the following:

14 (1) The financial costs of premature birth to so-
15 ciety, including—

16 (A) an analysis of stays in neonatal inten-
17 sive care units and the cost of such stays;

18 (B) long-term costs of stays in such units
19 to society and the family involved post-dis-
20 charge; and

21 (C) health care costs for families post-dis-
22 charge from such units (such as medications,
23 therapeutic services, co-pays visits and specialty
24 equipment).

1 (2) The factors that impact pre-term birth
2 rates.

3 (3) Opportunities for earlier detection of pre-
4 mature birth risk factors, including—

5 (A) opportunities to improve maternal and
6 infant health; and

7 (B) opportunities for public health pro-
8 grams to provide support and resources for par-
9 ents in-hospital, in non-hospital settings, and
10 post-discharge.

11 (c) ANALYSIS.—The analysis required by this sub-
12 section is an analysis of—

13 (1) targeted research strategies to develop effec-
14 tive drugs, treatments, or interventions to bring at-
15 risk pregnancies to term;

16 (2) State and other programs' best practices
17 with respect to reducing premature birth rates; and

18 (3) precision medicine and preventative care ap-
19 proaches starting early in the life course (including
20 during pregnancy) with a focus on behavioral and bi-
21 ological influences on premature birth, child health,

1 and the trajectory of such approaches into adult-
2 hood.

Passed the House of Representatives December 11,
2023.

Attest:

Clerk.

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